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JC962 U.S. PTO

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PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231	Attorney Docket No.	170-95-014D9
	First Named Inventor	Paul R. Dodge et al.
	Original Patent Number	5,718,112
	Original Patent Issue Date (Month/Day/Year)	February 17, 1998
	Express Mail Label No.	EL79137255US

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
 - ☐ Ribbioned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration (if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
17. Other: **copy of assignments**.....
.....
.....

18. CORRESPONDENCE ADDRESS



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NAME (Print/Type)	Michael A. Shimokaji	Registration No. (Attorney/Agent)	32,303
Signature	<i>[Signature]</i>	Date	12/16/01

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 170-95-014D1		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 2	Total Claims (37 CFR 1.16(j))	(B) 2	**** 0 =	x \$ _____ =	or	x \$ 18 =	0	
(C) 1	Independent claims (37 CFR 1.16(i))	(D) 1	* 0 =	x \$ _____ =		x \$ 84 =	0	
Basic Fee (37 CFR 1.16(h)) \$ _____							\$ 740	
Total Filing Fee \$ _____						OR	\$ 740.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 2	MINUS	** 20	* = 0	x \$ _____ =		x \$ 18 =	0
Independent Claims (37 CFR 1.16(i))	*** 1	MINUS	***** 3	= 0	x \$ _____ =		x \$ 84 =	0
Total Additional Fee \$ _____						OR	\$ 0	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. <u>01-1125</u> in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>01-1125</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>740.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								
<u>12/6/01</u> Date				 Signature of Applicant, Attorney or Agent of Record Michael A. Shimokaji Typed or printed name				

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Paul R. Dodge et al.

For: METHOD AND APPARATUS FOR THE DESTRUCTION OF VOLATILE ORGANIC COMPOUNDS

CERTIFICATE OF EXPRESS MAILING

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Arlington, VA 22202

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Date of Deposit: December 6, 2001

I hereby certify that an application for patent, including:

Fee Transmittal Form; Specification and Claims in double column copy of patent format;
5 Sheet(s) of formal Drawings, together with proposed corrected drawing; Reissue Oath/Declaration;
Written Consent of all Assignees; 37 C.F.R. § 3.73(b) Statement; Preliminary Amendment; a check in the
amount of \$740.00 to cover the filing fee; copy of Assignments; and Return Postcard are being deposited
with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on
the date indicated above and is addressed to: BOX REISSUE, U.S. Patent and Trademark Office, P.O.
Box 2327, Arlington, VA 22202.

Date of Deposit: 12/6/01

Michael A. Shimokaji, Reg. No. 32,303